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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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CHARLOTTE, N	C 20200-4000		Janet F. M	1 100		(Depositor's name)	
				/ May 10, 2011			(Signature)
			L	/			
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/684,893	10/684,893 10/14/2003 E OF INVENTION: DEGRADABLE POLY(ETHYLENE GLYC		J. Milton Harris				4856
ITTLE OF INVENTION: THEREFOR	DEGRADABLE PO	LY(ETHYLENE GLYC	OL) HYDROGELS WITH	H CONTROLLED	HALF-LIFE	AND TRECO	KSOKS
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL	L FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	05/10/2011
EXAMINER		ART UNIT	CLASS-SUBCLASS				
FISHER, AB	SIGAIL L	1616	424-486000				
1. Change of corresponden CFR 1.363).	ce address or indicatio	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of a fegistered patcht autoritys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							
3. ASSIGNEE NAME AN	D RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	e)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Nektar Therapeutics San Carlos, California							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) ar	re submitted:	p. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)					
Issue Fee Dublication Fee (No	omall antity discount	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.					
Advance Order - #		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-0605 (enclose an extra copy of this form).					
5. Change in Entity Status (from status indicated above)							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in							
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requestions of the United States	uired) will not be accepte ites Patent and Trademark	d from anyone other than the Office.	he applicant; a regis	tered attorney	or agent; or the	assignee or other party in
Authorized Signature _	p	Jan-11	II_	DateN	lay 10, 20	011	
Typed or printed name	John E. Jo	Registration No58,367					
an application. Confidenti submitting the completed this form and/or suggestio Box 1450, Alexandria, Vin Alexandria, Virginia 2231	ality is governed by 33 application form to the ons for reducing this burginia 22313-1450. DO 3-1450.	US.C. 122 and 37 CFR by USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indiving the chief Information Office COMPLETED FORMS TO	idual case. Any corer, U.S. Patent and To THIS ADDRESS.	nments on the rademark Offi SEND TO: Co	amount of time ice, U.S. Depart commissioner fo	e you require to complete tment of Commerce, P.O. r Patents, P.O. Box 1450,
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